

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 5/17/05

2 Serial/Patent # 10/323326

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing		<u>5/17/05</u>	\$ 100.00
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND \$100.00

8 TO BE REFUNDED BY:

<input type="checkbox"/> Treasury Check
<input checked="" type="checkbox"/> Credit Deposit A/C #:
, <u>02-1818</u>

10 REASON: Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY: C. Burt

TYPED/PRINTED NAME: Charitta Burt

SIGNATURE: C. Burt

OFFICE: PCP

TITLE: Paralegal
PHONE: 308-9140x207

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B